

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>flw</i>	78331	
O.I.P.E. CLASSIFIER		25	08-10-99
FORMALITY REVIEW	<i>BH</i>	<i>60245</i>	8-24-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	6 12
1	✓
2	✓
3	0 ✓
4	0 0
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	0 ✓
17	0 0
18	✓
19	✓
20	✓
21	✓
22	✓
23	0
24	✓
25	✓
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27	✓
28	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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